

Chemical Safety Endorsement  
CLASS WILL START...  
September 26, 2005-November 28, 2005  
Online Course through SUU

**DEADLINE TO REGISTER IS SEPTEMBER 19, 2005 AT 5:00 P.M.**

Description:

This workshop will prepare secondary science teachers to safely participate in laboratory activities in Physical Science, Chemistry, and Physics Courses. In order to protect teachers, students and school property from accidents caused by carelessness and/or misuse of laboratory chemicals or equipment, it is important for teachers and students to achieve proficiency in science safety, procedures and protocol.

This safety workshop provides instruction on laboratory equipment; the safe use of equipment; the use of safety supplies and equipment; relevant safety articles; and safety protocol. The workshop includes planning time for each teacher to review your own school's plan and formulate a suggested safety plan for science instruction. Teachers will gain basic skills necessary for a safe classroom and laboratory. Chemical management, storage and disposal will be key topics.

Cost for 1 college credit is: \$30.00 (will be cashed immediately)

**\*\*\*This check must be turned in before you can access class information\*\*\***

Cost for Course Fee is: \$150.00 (must be paid by Dec. 9<sup>th</sup> to receive FALL 05 grade)

If district is paying just get appropriate signatures on registration form and we will take care of billing...

Please send \$30.00 check to:

SUU BIOLOGY DEPT  
Kate Grandison  
C/O INSERVICE  
351 WEST UNIVERSITY BLVD  
SC 105  
CEDAR CITY, UTAH 84720

To register or with registration questions please contact Megan Hutchins via email [bioasst@suu.edu](mailto:bioasst@suu.edu)  
Or phone at 435.865.8418

Instructor will be Kim Weaver please contact him only once you are registered in course via email at [weaver@suu.edu](mailto:weaver@suu.edu).



# 2005 Science Professional Development Registration Form

*(Duplicate as Necessary)*

**Workshop Contact:** Kate Grandison

**Mail/Fax to:**

**Sessions fill on a first-come basis. Register early to secure your place.**

Workshop Title	Date	Location	Registration Fee
			\$30

**Contact Information:**

Teacher: \_\_\_\_\_  
District: \_\_\_\_\_  
School: \_\_\_\_\_  
Grade Level/Subject: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
School phone: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
e-mail: \_\_\_\_\_

**Commitment to Attend & District Approval:**

I understand that I am committing to this workshop and I will cancel at least two weeks prior to the workshop if I am unable to attend.

Teacher Signature: \_\_\_\_\_  
\_\_\_\_\_

Signature of Principal or District Representative indicates source of registration payment for workshop:

☐ **PERSONAL** Check # \_\_\_\_\_ enclosed **OR**

☐ **SCHOOL** \_\_\_\_\_ **OR**  
Principal

☐ **DISTRICT** \_\_\_\_\_  
District Representative

*\*Please contact your school or district to determine if approval is needed prior to registration.*

☐ Bill to this Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Return this completed registration form and your refundable deposit check to the workshop contact listed above.*

**A separate registration form must be submitted for each workshop you plan to attend.**